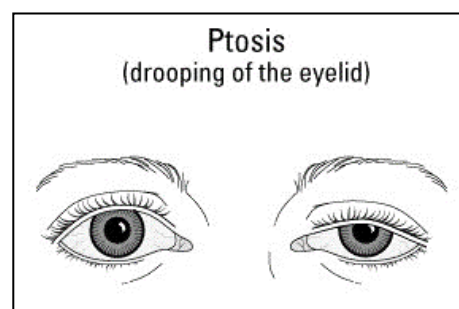


Congenital ptosis

This leaflet explains what congenital ptosis is and how it may be treated. If you have any questions or concerns, please speak to your doctor, nurse or orthoptist.

What is congenital ptosis?

Ptosis is the medical term for drooping of the upper eyelid, a condition that may affect one or both eyes. Ptosis that has been present since birth is called congenital ptosis.



What causes congenital ptosis?

While the cause is often unclear, the most common reason is a defect in the development of the muscle that raises the eyelid (levator muscle). Although usually a cosmetic problem, vision on the affected side may be reduced in some cases.

Is this condition associated with other eye problems?

Children with congenital ptosis may also have amblyopia (lazy eye), strabismus or squint (eyes that are not properly aligned or straight), or refractive errors (need for glasses).

Is there any treatment for this condition?

Congenital ptosis is treated surgically; the type of operation is based on how severe your child's ptosis is and the strength of their levator muscle. If the ptosis is not severe, surgery is generally carried out when your child is between 3 and 5 years (pre-school years). However, when the ptosis interferes with your child's vision, surgery is performed at an earlier age to allow proper visual development.

How is the operation carried out?

The operation is usually done under general anaesthetic as a day case. Your child will have dissolving stitches at the site of the operation.

What to expect after the operation

A dressing may be applied for 24 hours. Make sure the wound is kept clean and dry. There should be very little discharge from the wound and if necessary, you

may clean it using cooled, boiled water and a clean cosmetic pad or tissue. Use a separate pad or tissue for each wipe to the area.

Your child will be prescribed some lubricating eye drops and cream along with an antibiotic eye drop – please use as directed.

Are there any risks or side effects?

- There may be bruising around the eye.
- There is a small risk of infection of the eyelid or the eye.
- There is a possibility of under or over correction of the eyelid or asymmetry with the opposite eyelid, which may require further operations.
- There is a possibility your child will be unable to close the eyelids permanently.

What are the benefits?

- Restoring normal appearance of the eyelid.
- Improved cosmetic appearance may improve your child's self-confidence, especially if they are teased at school.

Contacting us

If you have a minor eye problem, please seek advice from your GP, optician or pharmacist. If urgent, please attend Eye Casualty or call 111.

Eye Casualty (Reading):	Mon-Fri 8.30am to 5pm; Sat & Sun & bank holidays 9am-12.30pm; Closed Christmas Day and New Year's Day.
Eye Casualty: Prince Charles Eye Unit (Windsor):	Mon-Fri 8.30am to 5pm; Sat 8.30am-12.30pm; Closed Sun & bank holidays.
Dorrell Ward (Reading):	0118 322 7172 (24 hours a day)
Eye Day Unit (Reading):	0118 322 7123 (Mon-Fri 7am to 6pm)
Eye Day Unit (PCEU Windsor)	01753 636496 Mon-Fri 7am to 6pm)

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Ophthalmology, June 2023. Next review due: June 2025

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